S&H Form: (02/05)

REPLY/AMENDMENT FEE TRANSMITTAL

Attorney Docket No. 1046.1213 **Application Number** 09/555,057 Filing Date July 10, 2000 First Named Takeshi KUMAZAWA et al. Inventor **Group Art Unit** 2174

AMOUNT ENCLOSED

Ke, Peng 0.00 **Examiner Name**

FEE CALCULATION (fees effective 12/08/04)

CLAIMS AS AMENDED	Claims Remaining After Amendment	Highest Number Previously Paid For	Number Extra	Rate	Cal	culations
TOTAL CLAIMS	43	- 43 =	0	X \$ 50.00 =	\$	0.00
INDEPENDENT CLAIMS	6	- 6=	0	X \$ 200.00 =	\$	0.00
made for an ex enclosed (1 mg	al Action set an <u>origi</u> tension to cover the onth (\$120)); (2 mon onths (\$2,160):	date this reply is file	d for which the	requisite fee is	\$	120.00
If Notice of App	eal is enclosed, add	(\$500.00)				
If Statutory Disc	claimer under Rule 2	0(d) is enclosed, ad	d fee (\$130.00)			
Information Dis	closure Statement (Rule 1.17(p)) (\$180.0	00)			
Total of above Calculations =						120.00
Reduction by 5	0% for filing by smal	l entity (37 CFR 1.9,	1.27 & 1.28)			
TOTAL FEES DUE =					\$	120.00
	an entry (2), entry (3) is "0".		· .		•	
(0) If and (0) in less th	00 (0) 4- 110011					

- (2) If entry (2) is less than 20, change entry (2) to "20".
- (4) If entry (4) is less than entry (5), entry (6) is "0".
- (5) If entry (5) is less than 3, change entry (5) to "3".

METHOD OF PAYMENT

1	METHOD OF TATMENT							
- 🛛	Check enclosed as payment.							
	Charge "TOTAL FEES DUE" to the Deposit Account No. below.							
	No payment is enclosed.							
	GENERAL AUTHORIZATION							
\boxtimes	If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby authorized to credit any overpayment or charge any additional fees necessary to:							
	Deposit Account No.	19-3935						
	Deposit Account Name	STAAS & HALSEY LLP						
⊠			nents or charge any additional fees required under during the prosecution of this application, including					

any related application(s) claiming benefit hereof pursuant to 35 USC § 120 (e.g., continuations/divisionals/CIPs under 37 CFR 1.53(b) and/or continuations/divisionals/CPAs under 37 CFR 1.53(d)) to maintain pendency hereof or of any such related application.

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Typed Name Allison, Olenginski Reg. No. Date Signature